

**POWER OF ATTORNEY TO PROSECUTE APPLICATIONS BEFORE THE USPTO**

I hereby appoint:



Practitioners associated with the Customer Number:

45853

**OR**



Practitioner(s) named below (if more than ten patent practitioners are to be named, then a customer number must be used):

as attorney(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) and are authorized to act on behalf of the Assignee in connection with any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b).

Assignee Name and Address:

NOVARTIS VACCINES AND DIAGNOSTICS, INC.

INTELLECTUAL PROPERTY

P.O. BOX 8097

EMERYVILLE, CA 94662-8097

**A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed.**

**SIGNATURE of Assignee of Record**

The individual whose signature and title is supplied below is authorized to act on behalf of the assignee

Name Lisa E. Alexander

Signature

*Lisa E. Alexander*

Date August 23, 2007

Title Assistant Secretary

Telephone 510-923-2585